

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LET AMERICA WORK

ADDRESS (number and street)

PO BOX 9891

Check if different
than previously
reported. (ACC)

ARLINGTON

VA

22219

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00582700

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☒ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

MITCHELL, GEORGE, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MITCHELL, GEORGE, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LET AMERICA WORK

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		184760.05
(b) Cash on Hand at Beginning of Reporting Period.....	571592.83	
(c) Total Receipts (from Line 19)	521801.00	1107601.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1093393.83	1292361.05
7. Total Disbursements (from Line 31).....	512420.80	711388.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	580973.03	580973.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LET AMERICA WORK

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
06	/	30	/	2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

521800.00

1107200.00

(ii) Unitemized

1.00

401.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

521801.00

1107601.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

521801.00

1107601.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

521801.00

1107601.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

521801.00

1107601.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	124792.80	303256.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	124792.80	303256.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	387628.00	408131.15
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	512420.80	711388.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	512420.80	711388.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	521801.00	1107601.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	521801.00	1107601.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	124792.80	303256.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	124792.80	303256.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRYANT, ANTHONY, W., ,

Mailing Address 108 N BARSTOW ST

City
WAUKESHAState
WIZip Code
53186-4928FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CENTURY FENCE COOccupation (for Individual)
BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11A.39

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEREZ, WILLIAM, D., ,

Mailing Address 81 SEAGATE DR
#1603City
NAPLESState
FLZip Code
34103-2486FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : SA11A.38

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EASTHAM, WILLIAM, , ,

Mailing Address 1840 N PROSPECT AVE
#812City
MILWAUKEEState
WIZip Code
53202-1997FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2016

Transaction ID : SA11A.41

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

31000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FUSSNER, CHRISTOPHER, J., ,

Mailing Address 1860 N SPIRIT DANCE RD

City
JACKSONState
WYZip Code
83001-9011FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRANSTECHNOLOGY PTE LTDOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2016

Transaction ID : SA11A.42

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LYNCH, BARBARA, , ,

Mailing Address 1100 WEST ESTATE DR

City
MEQUONState
WIZip Code
53092-8557FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2016

Transaction ID : SA11A.43

Amount of Each Receipt this Period

30000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FLAUM, DAVID, M., ,

Mailing Address 220 SANDRINGHAM RD

City
ROCHESTERState
NYZip Code
14610-3458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLAUM MANAGEMENT CO INC.Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11A.44

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

41000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWERIN, WARREN, L., ,

Mailing Address 667 OCEAN RD

City
VERO BEACH

State
FL

Zip Code
32963-3517

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : SA11A.45

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TOPPER, LEWIS, , ,

Mailing Address 3605 CAMP MINEOLA RD

City
MATTITUCK

State
NY

Zip Code
11952-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FAST FOOD SYSTEMS, INC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11A.46

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EINHORN, STEVE, , ,

Mailing Address 8205 N RIVER RD

City
MILWAUKEE

State
WI

Zip Code
53217-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAPITAL MIDWEST FUND

Occupation (for Individual)
VENTURE CAPITAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11A.47

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

45000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILKIE, LEIGHTON, J., ,

Mailing Address 811 S 2ND ST

City
ALMA

State
WI

Zip Code
54610-9756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SA11A.48

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BELL, BRUCE, , ,

Mailing Address 958 HICKORY AVE

City
DE PERE

State
WI

Zip Code
54115-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BELMARK, INC

Occupation (for Individual)
CHAIRMAN / FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11A.49

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATTHEWS, WILLIAM, , ,

Mailing Address 380 NORTH LAKE WAY

City
PALM BEACH

State
FL

Zip Code
33480-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PRIVATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2016

Transaction ID : SA11A.50

Amount of Each Receipt this Period

7500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURKE, KATHRYN, , ,

Mailing Address 7710 N MERRIE LN

City
MILWAUKEE

State
WI

Zip Code
53217-2962

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2016

Transaction ID : SA11A.51

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHERCHIAN, ARA, A., ,

Mailing Address 3100 NAGAWICKA RD

City
HARTLAND

State
WI

Zip Code
53029-9355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2016

Transaction ID : SA11A.52

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DARROW, RUSSELL, , ,

Mailing Address W133 N8569 EXECUTIVE PARKWAY

City
MENOMONEE FALLS

State
WI

Zip Code
53051-3344

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUSS DARROW GROUP

Occupation (for Individual)
CEO/CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2016

Transaction ID : SA11A.53

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

16000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. JENSEN, JAY, , ,

Mailing Address **659 FARWELL DR**

City
MADISON

State
WI

Zip Code
53704-6029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLASEN QUALITY COATINGS

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

06 / 01 / 2016

Transaction ID : SA11A.55

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STEPHENS, WARREN, , ,

Mailing Address **111 CENTER ST**

City
LITTLE ROCK

State
AR

Zip Code
72201-4402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEPHENS, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

06 / 03 / 2016

Transaction ID : SA11A.56

Amount of Each Receipt this Period

100000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HARTUNG, DANIEL, J., ,

Mailing Address **56 ARBOREDGE WAY**

City
FITCHBURG

State
WI

Zip Code
53711-7213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARTUNG BROTHERS INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 07 / 2016

Transaction ID : SA11A.57

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

130000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTS, RICHARD, H., DR,

Mailing Address PO BOX 18

City
LAKEWOODState
NJZip Code
08701-0018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : SA11A.58

Amount of Each Receipt this Period

33800.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLNER, TED, D., ,

Mailing Address 5112 W HIGHLAND RD

City
MEQUONState
WIZip Code
53092-1137FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIDUCIARY MANAGEMENT, INCOccupation (for Individual)
EXECUTIVE CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2016

Transaction ID : SA11A.59

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KUBLY, MICHAEL, C., ,

Mailing Address 8245 N RANGE LINE RD

City
MILWAUKEEState
WIZip Code
53217-2042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2016

Transaction ID : SA11A.60

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

108800.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BAUMGARTNER, DONALD, , ,

Mailing Address 2280 W DEAN RD

City
MILWAUKEE

State
WI

Zip Code
53217-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAPER MACHINERY CORP

Occupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2016

Transaction ID : SA11A.61

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARRY, WILLIAM, , ,

Mailing Address 15085 BENDING BRAE CT

City
BROOKFIELD

State
WI

Zip Code
53005-2681

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SPEED SYSTEMS, INC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2016

Transaction ID : SA11A.63

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOLEY, CHRISTOPHER, M., ,

Mailing Address 2434 N TERRACE AVE

City
MILWAUKEE

State
WI

Zip Code
53211-4511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROFESSOR & CHAIR

Occupation (for Individual)
MARQUETTE UNIVERSITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2016

Transaction ID : SA11A.62

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

20000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAY, C., BOYDEN, ,

Mailing Address 1534 28TH ST NW

City
WASHINGTONState
DCZip Code
20007-3058FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOYDEN GRAY & ASSOCIATESOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2016

Transaction ID : SA11A.65

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HENTZEN, ALBERT, L., ,

Mailing Address 9728 N LAKE DR

City
MILWAUKEEState
WIZip Code
53217-6102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HENTZEN COATINGSOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2016

Transaction ID : SA11A.66

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MELLOWES, JOHN, A., ,

Mailing Address 1212 W GLEN OAKS LN

City
MEQUONState
WIZip Code
53092-3357FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHARTER MFGOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2016

Transaction ID : SA11A.67

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

40000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZIEGLER, ANDREW, M., ,

Mailing Address 100 N CORPROATE DR, STE 190

City
BROOKFIELDState
WIZip Code
53045-5866FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2016

Transaction ID : SA11A.64

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BURKE, JOHN, J., , III

Mailing Address 3452 N HACKETT AVE

City
MILWAUKEEState
WIZip Code
53211-2945FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BURKE PROPERTIESOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11A.72

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KRAFT, ROBERT, , ,

Mailing Address 311 E CHICAGO ST
STE 510City
MILWAUKEEState
WIZip Code
53202-5896FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIRST PATHWAY PARTNERSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11A.69

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

35000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NASGOVITZ, WILLIAM, , ,

Mailing Address 4470 N LAKE DR.

City
SHOREWOODState
WIZip Code
53211-1775FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HEARTLAND ADVISORSOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11A.68

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, DONALD, S., ,

Mailing Address 19160 STILL POINT TR

City
BROOKFIELDState
WIZip Code
53045-4809FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11A.71

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LADY BUG CLUB LLC

Mailing Address 610 N WATER ST
STE 200City
MILWAUKEEState
WIZip Code
53202-4908FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : SA11A.70

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

32500.00

TOTAL This Period (last page this line number only).....▶

521800.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2016

FEC Identification Number

C

Transaction ID : 101

Amount of Each Disbursement this Period

975.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BMO CONSULTING

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2016

FEC Identification Number

C

Transaction ID : 103

Amount of Each Disbursement this Period

975.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2016

FEC Identification Number

C

Transaction ID : 102

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1970.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. MADISON MANAGEMENT GROUP

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2016

FEC Identification Number

C**Transaction ID : 105**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SENTINEL STRATEGIC ADVISORS, LLCMailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2016

FEC Identification Number

C**Transaction ID : 104**

Amount of Each Disbursement this Period

11678.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GITCHO, GAIL, , ,

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2016

FEC Identification Number

C**Transaction ID : 106**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35678.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. STICK & RUDDER STRATEGIES, INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2016

Mailing Address 705 MELVIN AVE # 105

City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 107**

Amount of Each Disbursement this Period

3002.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2016

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 108**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2016

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 109**

Amount of Each Disbursement this Period

1170.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4192.71

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2016

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 110

Amount of Each Disbursement this Period

1328.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		21		2016

Mailing Address 1593 SPRING HILL RD, STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 111

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2016

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : 112

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1848.10

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. MADISON MANAGEMENT GROUP

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		04		2016

FEC Identification Number

C**Transaction ID : 113**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BMO CONSULTING

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2016

FEC Identification Number

C**Transaction ID : 114**

Amount of Each Disbursement this Period

975.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SENTINEL STRATEGIC ADVISORS, LLCMailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2016

FEC Identification Number

C**Transaction ID : 115**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

24975.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	1	6		

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 116

Amount of Each Disbursement this Period

136.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GITCHO, GAIL, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	6		

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 117

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	1	6		

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 118

Amount of Each Disbursement this Period

292.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5428.91

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	8		2	0	1	6		

FEC Identification Number

C**Transaction ID : 119**

Amount of Each Disbursement this Period

195.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD, STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		2	3		2	0	1	6		

FEC Identification Number

C**Transaction ID : 120**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MADISON MANAGEMENT GROUP

Mailing Address 3101 HEMLOCK HILLS LANE

City
APEXState
NCZip Code
27539Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		2	7		2	0	1	6		

FEC Identification Number

C**Transaction ID : 121**

Amount of Each Disbursement this Period

14000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14695.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2016

FEC Identification Number

C**Transaction ID : 122**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2016

FEC Identification Number

C**Transaction ID : 123**

Amount of Each Disbursement this Period

1170.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BMO CONSULTING

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

FEC Identification Number

C**Transaction ID : 124**

Amount of Each Disbursement this Period

825.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2015.93

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 125

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SENTINEL STRATEGIC ADVISORS, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2016

Mailing Address 1647 WISCONSIN AVENUE NW
2ND FLRCity
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
TRAVEL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 126

Amount of Each Disbursement this Period

925.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GITCHO, GAIL, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2016

Mailing Address 142 COMMERCIAL STREET #501

City
BOSTONState
MAZip Code
02109Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : 127

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15925.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	6

FEC Identification Number

C**Transaction ID : 128**

Amount of Each Disbursement this Period

1950.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STICK & RUDDER STRATEGIES, INC

Mailing Address 705 MELVIN AVE # 105

City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	6

FEC Identification Number

C**Transaction ID : 129**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STICK & RUDDER STRATEGIES, INC

Mailing Address 705 MELVIN AVE # 105

City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	1	6

FEC Identification Number

C**Transaction ID : 130**

Amount of Each Disbursement this Period

221.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

17172.25

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LET AMERICA WORK

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 10156 PERKINS RD, STE 217F

City
BATON ROUGEState
LAZip Code
70810Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2016

FEC Identification Number

C**Transaction ID : 131**

Amount of Each Disbursement this Period

390.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD, STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

FEC Identification Number

C**Transaction ID : 132**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

890.30

124792.80

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 28
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) LET AMERICA WORK				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00582700 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <input type="checkbox"/> Memo Item STICK & RUDDER STRATEGIES, INC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 705 MELVIN AVE # 105			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">387628.00</div>		
City ANNAPOLIS	State MD	Zip Code 21401	Transaction ID : 1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure MEDIA		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: FEINGOLD, RUSSELL, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">397919.15</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
City	State	Zip Code	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure		Category/ Type <div style="border: 1px solid black; width: 50px; height: 20px; margin-top: 2px;"></div>	<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Name of Federal Candidate: <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Support <input type="checkbox"/> Oppose </div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">387628.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(a) TOTAL Independent Expenditures	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">387628.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MITCHELL, GEORGE, , ,

Signature

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y